## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/542,851

1	01.41110.40.511.51											
		CLAIMS AS FILED - PART I  (Column 1) (Column 2)						SMALL EI	YTITY	Of		R THAN ENTITY
U.S. NATIONAL STAGE FEES				(Coldinit 1)			7	RATE	FEE	$\neg$	RATE	
B/	SIC FEE	<del></del>	SMALL EI	SMALL ENT. = \$ 150 U			┨	BASIC FEE	+		BASIC FEE	FEE
EX	AMINATION	FEE		7 Article 33(1)	All other situations =		1	EXAM. FEE	<del> </del> -	-   "		300
- -	ARCH FEE		U.S. is ISA =		All	\$ 1 <u>0</u> 0 / \$ 200  All other situations =				-	EXAM. FEE	1:0
36			9	ALL other countries = \$ 200 / \$ 400		\$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	400
	<del></del> -	SPEC. PGS.	157 mi	157 minus 100 =		57/50=2		X \$ 125 =			X \$ 250 =	50
TO	TAL CHARGE	ABLE CLAIMS	22"	ninus 20 =	·á	. 2		X \$ 25 =		OR	X \$ 50 =	100
IND	EPENDENT C	CLAIMS	3	minus 3 =	•			X \$ 100 =		OR	X \$ 200 =	
MU	LTIPLE DEPE	NDENT CLAIM PI	RESENT					+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2							_	TOTAL		OR	TOTAL	150
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST							<b>3</b> 1	SMALL		OR <b>7</b>	OTHER SMALL	ENTITY
A FA		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	••		=		X \$ 25 =		OR	X \$ 50 =	
AME	Independent	<u> -</u>	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	+ \$ 180 =		OR	+ \$ 360 =	
•								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Columi	2)	(Column 3)					•	
	74	CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ST R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
1	ndependent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
							Ť	OTAL ADDIT. FEE		OR	FEE	
. K	the "Highest Num the "Highest Num	nn 1 is less than the nber Previously Paid nber Previously Paid ber Previously Paid I	For IN THIS SPA For IN THIS SPA	ACE is less th ACE is less th	an '20', an '3', (	, enter "20". enter "3".	the a	uppropriate box i	n column 1.			

FORM PTO-875 (Rev. 02/2005)

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